

## ACKNOWLEDGEMENT OF SECURITY ZONE AND PERMIT TO DEPART DURING A NATIONAL EMERGENCY

**WARNING:** Authorization to depart a Maritime security Zone during a national emergency does not constitute license or permission from the United States to engage in any activity that may be contrary to other applicable United States law or applicable law of a foreign coastal state.

Vessel Owner/Operator Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Residence Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone#: \_\_\_\_\_ Fax#: \_\_\_\_\_ E-mail: \_\_\_\_\_

**1. I am the (circle all that apply): | Owner | Master | Person in Charge | Operator | of:**

Vessel Name: \_\_\_\_\_ Flag: \_\_\_\_\_ Type: \_\_\_\_\_  
Registration#: \_\_\_\_\_ Length: \_\_\_\_\_ Homeport: \_\_\_\_\_

**2. I acknowledge receipt of and understand the provisions of the Security Zone Regulations in 33 CFR 165.T07-13 and the U.S. Coast Guard Warning Notice. I request authorization to depart the Security Zone with the intent to enter the Cuban Territorial Sea during the voyage described below:**

Last U.S. port prior to entering Cuban waters: \_\_\_\_\_ Date of departure: \_\_\_\_\_  
Intended Cuban destination port: \_\_\_\_\_ Date of arrival: \_\_\_\_\_  
Approximate position of intended entry into Cuban waters: Lat \_\_\_\_\_ N Long \_\_\_\_\_ W  
Purpose of Voyage: \_\_\_\_\_

**3. I acknowledge that nothing in this permit to depart the U.S. Security Zone authorizes any violation of U.S. or foreign laws or regulations. (Detailed information regarding the U.S. embargo can be obtained from the U.S. Department of the Treasury, Office of Foreign Assets Control in Miami at 305-810-5140.) I certify that all persons authorized to crew, operate or assist operations aboard my vessel, as listed below, have been made aware of the contents of this form, the regulations, and the USCG Warning Notice.**

Name	/Birthdate	/Address	/City	/State	/Zip
1.	/	/	/	/	/
2.	/	/	/	/	/
3.	/	/	/	/	/
4.	/	/	/	/	/
5.	/	/	/	/	/

**4. I understand that willfully making a false, fictitious or fraudulent statement, or concealing a material fact in this matter can result in a maximum penalty of imprisonment for 5 years and a fine of \$250,000 (18 USC 1001). I certify the above information I have supplied is true and correct.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**5. Fax the completed form to the Seventh Coast Guard District Office at 305-415-6925. Questions: 305-415-6920.**

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USCG Official Use:

Authorization to depart the Security Zone is: GRANTED \_\_\_\_\_ DENIED \_\_\_\_\_

USCG Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name & Unit: \_\_\_\_\_

Revised 12/4/01. Previous editions are obsolete.

www access: <http://www.uscg.mil/d7/d7o/mic/cubapermit.htm>